<u>Recommended ICD-10-CM Codes</u> Pre-Exposure Prophylaxis (PrEP) and Post-Exposure Prophylaxis (PEP)

The International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) coding system does not designate specific billing codes for PrEP- or PEP-related services. The New York State Department of Health and the New York City Department of Health and Mental Hygiene recommend the use of the following ICD-10-CM codes for PrEP- and PEP-related outpatient services.

VISITS: All office visits must include a principal diagnosis/first-listed condition to be billable. Z20.6, bolded below, is classified as an acceptable principal diagnosis in the ICD-10-CM system. Always include Z20.6 when coding PrEP or PEP visits. If an insurer requires additional coding clarifying a patient's risk, Z20.2 (sexual exposure risk) and F19.20 (injection drug use exposure risk) can be added. These codes avoid the use of the Z72.x codes that are considered stigmatizing because they indicate problems related to lifestyle.

TESTS: HIV, STI, HCV and other tests associated with PrEP and PEP are related to the patient's ongoing risk of infection, even if the patient is asymptomatic. Screening tests are ordered at initial visit. Subsequent visits use 'contact with' codes. Tests which are ordered to evaluate the patient for conditions potentially associated with long-term use of PrEP medication should include the code Z79.899.

| PrEP-Related Codes — Initial Visit | | | |
|---|-------------|---|--|
| Coding for: | ICD-10 Code | Description | |
| Visit | Z20.6 | Contact with and (suspected) exposure to HIV | |
| | Z20.2 | Contact with and (suspected) exposure to infections with a predominantly sexual mode of transmission | |
| Initial Tests | Z01.812 | Encounter for pre-procedural laboratory examination (Applicable to blood and urine tests prior to treatment or procedure) | |
| | Z11.3 | Encounter for screening for infections with a predominantly sexual mode of transmission | |
| | Z11.4 | Encounter for screening for human immunodeficiency virus | |
| | Z11.59 | Encounter for screening for other viral diseases* | |
| PrEP-Related Codes — Second and Subsequent Visits | | | |
| Coding for: | ICD-10 Code | Description | |
| Visit and Tests | Z20.6 | Contact with and (suspected) exposure to HIV | |
| | Z20.2 | Contact with and (suspected) exposure to infections with a predominantly | |
| | | sexual mode of transmission | |
| | Z79.899 | Other long-term drug therapy | |
| | Z20.5 | Contact with and (suspected) exposure to viral hepatitis* | |

| PEP-Related Codes — Initial and Subsequent Visits | | | |
|---|-------------|--|--|
| Coding for: | ICD-10 Code | Description | |
| Visit and Tests | Z20.6 | Contact with and (suspected) exposure to HIV | |
| | Z20.2 | Contact with and (suspected) exposure to infections with | |
| | | a predominantly sexual mode of transmission | |
| | Z77.21 | Contact with and (suspected) exposure to potentially hazardous body fluids | |
| | Z20.5 | Contact with and (suspected) exposure to viral hepatitis | |

| *When ordering hepatitis C tests for patients insured through Medicare: | | | | |
|---|---|--|--|--|
| Medicare covers annual hepatitis C screening only for high-risk individuals | A single, once-in-a-lifetime screening test is covered for individuals born from 1945 through 1965 who do not meet the high-risk definition. Per Medicare guidance, the initial encounter/test requisition for hepatitis C tests must include diagnosis code Z72.89 (Other problems related to lifestyle). Follow-up encounters/tests for annual hepatitis C testing should include diagnosis codes Z72.89 and/or F19.20 (Unspecified drug dependence). Consult Medicare guidance documents for specific billing details. | | | |



